## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		7	OF		31
(ch	(check only one)									
×	11a		11b		11c		12			
	13		14		15		16			17

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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) ABIOMED INC POLITICAL A	CTION COMMITTEE (ABIOMED P.	AC)			
Full Name (Last, First, Middle Initial)  Steven Balk	Date of Receipt				
Mailing Address 22 Cherry Hill Drive	iling Address 22 Cherry Hill Drive				
City	State Zip Code MA 01923	Transaction ID : SA11AI.5867  Amount of Each Receipt this Period			
Danvers					
FEC ID number of contributing federal political committee.	C	180.00			
Name of Employer	Occupation	Individual Contribution			
Individual Contribution	Director of Clinical Training				
Receipt For:  Primary  General	Aggregate Year-to-Date ▼				
Other (specify) ▼	720.00				
Full Name (Last, First, Middle Initial)  3. Julius Becker	Date of Receipt				
Mailing Address 22 Cherry Hill Drive		12 31 2015			
City	State Zip Code	Transaction ID : SA11AI.5868			
Danvers	MA 01923	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	60.00			
Name of Employer	Occupation	Individual Contribution			
Abiomed, Inc.	Manufacturing Engineer				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  240.00				
Full Name (Last, First, Middle Initial)  C. Karim Benali					
Mailing Address 22 Cherry Hill Drive					
City Danvers	State Zip Code MA 01923	Transaction ID : SA11AI.5869  Amount of Each Receipt this Period  600.00			
FEC ID number of contributing federal political committee.	С				
Name of Employer	Individual Contribution				
Abiomed, Inc.	Chief Medical Officer				
Receipt For:  Primary  General	Aggregate Year-to-Date ▼				
Other (specify)	2400.00				
SUBTOTAL of Receipts This Page (optional).		840.00			
TOTAL This Period (last page this line numb	er only)				